

# UNITED STATES PATENT AND TRADEMARK OFFICE

<b>Inventor(s):</b> Timothy R. H. Pratt et al.	<b>Examiner:</b> NAJARIAN, Lena
<b>Appln. No.:</b> 10/789,798	<b>Group Art Unit:</b> 3686
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<b>Title:</b> SYSTEMS AND METHODS FOR VALIDATING PATIENT AND MEDICAL DEVICE INFORMATION	<b>Customer No.:</b> 42074
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Commissioner for Patents  
P. O. Box 1450  
Alexandria, VA 22313-1450

I CERTIFY THAT THIS PAPER (ALONG WITH ANY REFERRED TO AS BEING ATTACHED OR ENCLOSED) IS BEING TRANSMITTED TO THE COMMISSIONER FOR PATENTS, P. O. BOX 1450, ALEXANDRIA, VA 22313-1450 ON NOVEMBER 17, 2009, VIA THE USPTO-EFS-WEB FILING SYSTEM.

Karen Hull  
KAREN HULL

## SUPPLEMENTAL INFORMATION DISCLOSURE STATEMENT

In compliance with the duty imposed by 37 C.F.R. 1.56, and in accordance with C.F.R. sections 1.97 et seq., the materials enclosed herewith are brought to the attention of the Examiner as possibly being of interest in connection with the above-identified patent application. Consideration of each of the documents listed on the attached SB/08 form(s) is respectfully requested. The filing of this Supplemental Information Disclosure Statement shall not be construed to be an admission that the information cited in the statement is, or is construed to be, prior art or material to the patentability of the present application.

This Supplemental Information Disclosure Statement is being filed before the mailing date of a Final Office Action or Notice of Allowance and is accompanied by the fee of \$180.00. Should any additional fee be required, the Commissioner is authorized to charge our Deposit Account No. 06-0029 and is requested to notify us of the same.

Respectfully submitted,

FAEGRE & BENSON LLP

Dated: November 17, 2009

By: /Paul G. Koziol/  
Paul G. Koziol, Reg. No. 58,515  
612/766.8965  
Customer No.: 42074